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١٠[APPLICATION NO.				D INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.			
	10/016,047	12/11/2001		Michaeldavid Uri			2067 4824		824		
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l	APPLN. TYPE	APPLN. TYPE SMALL ENTITY nonprovisional YES EXAMINER HANSEN, JAMES ORVILLE		\$665 ART UNIT 3637		EE	TOTAL FEE(S) DUE	DAT	E DUE		
	nonprovisional						\$965	11/23/2004			
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•	HANSEN, JA										
	. Change of correspondence	ee Address" (37	-	nting on the patent front		. [1] \[1] [8]	& OLSO	N			
,	CFR 1.363). ☐ Change of correspond Address form PTO/SB/1	dence address (or Change of 0 122) attached.	Correspondence	or agents OR, alternatively,							
		tion (or "Fee Address" Indica or more recent) attached. Us		(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3	. ASSIGNEE NAME ANI	ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
	PLEASE NOTE: Unless recordation as set forth i	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
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·	Please check the appropriate	e assignee category or category	ries (will not be pri	inted on the p	patent); 🚨 individu	al 🔾 co	orporation or other private g	roup entity	ogovernmen		
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1	NOTE: The Issue Fee and I	D is requested to apply the Iss Publication Fee (if required) cords of the United States Pat	will not be accepted	l from anvon							

11/23/2004

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PTO/SB/17 (10-04v2)
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EE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

XX Applicant claims small entity status. See 37 CFR 1.27

(\$) 965.00 **TOTAL AMOUNT OF PAYMENT**

Signature

2 9 2004

Complete if Known						
Application Number	10/016,047					
Filing Date	12/11/2001					
First Named Inventor	Michaeldavid Uri					
Examiner Name .	James Orville Hansen					
Art Unit	3637					
Attorney Docket No.	2067					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES								
	Large Entity Small Entity								
Deposit Account:				Fee	Fee Description				
Deposit Account 15-0500	Code			(\$)	Surpharea Into Slipe for as onth	Fee Paid			
Number Deposit		130	2051		Surcharge - late filing fee or oath				
Account OLSON & OLSON	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet				
Name The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification				
Charge fee(s) indicated below XX Credit any overpayments	1812 2,	,520	1812	2,520	For filing a request for ex parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action				
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to the above-identified deposit account.	1051	110	2251	E E	Examiner action				
FEE CALCULATION		110		55 245	Extension for reply within first month Extension for reply within second month				
1. BASIC FILING FEE		430	2252 2253	215	,				
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid		980	2253		Extension for reply within third month				
Code (\$) Code (\$)	1254 1,			765					
1001 790 2001 395 Utility filing fee	1255 2;		2255	•	Extension for reply within fifth month				
1002 350 2002 175 Design filing fee		¹ 340	2401		Notice of Appeal	 			
1003 550 2003 275 Plant filing fee		340	2402		Filing a brief in support of an appeal				
1004 790 2004 395 Reissue filing fee	1	300	2403		Request for oral hearing				
1005 160 2005 80 Provisional filing fee	1451 1,		1451		Petition to institute a public use proceeding				
SUBTOTAL (1) (\$)	1452	110	2452	55	Petition to revive - unavoidable				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,	,370	2453	685	Petition to revive - unintentional	<u> </u>			
Fee from	1501 1,		2501		Utility issue fee (or reissue)	665.00			
Extra Claims below Fee Paid Total Claims X = X		490	2502		Design issue fee				
Independent 3** - V		660	2503		Plant issue fee				
Claims		130	1460		Petitions to the Commissioner				
Long Folike Co U.SNic.	1807	50	1807		Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee	1806	180	1806		Submission of Information Disclosure Strnt				
Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20 1201 88 2201 44 Independent claims in excess of 3	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))				
1203 300 2203 150 Multiple dependent claim, if not paid	1810	790	2810	395	For each additional invention to be				
1204 88 2204 44 ** Reissue independent claims					examined (37 CFR 1.129(b))				
over original patent		790	2801		Request for Continued Examination (RCE)				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application I Cation Fee				
	Other fe	e (spe	ecify) _	PUD	lication ree	300.00			
**or number previously paid, if greater; For Reissues, see above	*Reduce	ed by	Basic F	iling Fe	ee Paid SUBTOTAL (3) (\$)	965.00			
Name (Print/Type) MARK D. OLSON Registration No. 31,186 Telephone (503)222-1321									

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